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SECRETARY OF STATE





## LAW OFFICE OF KEVIN F. JURSINSKI

**REAL ESTATE • BUSINESS • CONSTRUCTION** 

April 15, 2020

Secretary of State Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

RE: Hempra, LLC

Dear Sirs:

Enclosed please find Articles of Organization and a Certificate Designating Registered Agent for the above limited liability company.

We respectfully request that these articles be filed. We have enclosed our check in the amount of \$160.00 for the filing fee and return of a certified copy of the Articles of Organization to the undersigned.

Should you have any questions, please do not hesitate to contact my office. Thank you for your assistance in this matter.

Respectfully,

KEVIN F. JURSINSKI, B.C.S.

KFJ\lh

Enclosure

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2020 APR 17 PM 3: 18 SECRETARY OF STATI

## ARTICLES OF ORGANIZATION OF HEMPRA, LLC

The undersigned members hereby certify that they have associated for the purpose of becoming a limited liability company under the laws of the State of Florida, providing for the formation, rights, privileges, and immunities of limited liability companies for profit. The undersigned further declare that the following Articles shall be the Charter and authority for the conduct of business of such limited liability company.

#### NAME

The name of the limited liability company shall be **HEMPRA**, **LLC** (the "Company").

#### ADDRESS OF PRINCIPAL PLACE OF BUSINESS

The mailing address and street address of the principal office of this Company shall be 3168 Barrett Ave. Naples, FL 34112

#### **REGISTERED AGENT**

The name and address of the initial registered agent in the State of Florida is as follows:

Kevin F. Jursinski, Esquire 15701 S. Tamiami Trail Fort Myers, Florida 33908

#### **MANAGEMENT**

The Company shall be manager-managed, whose name(s) and address are	co Has	2020	
follows:	111	'nPR	
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Stacy Roberts	(=)	7	E serven
Andrew Gibson			
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Naples, FL 34112	25	_	
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#### **MEMBERSHIP**

The Members shall have the right to admit new members upon making such contributions as are set out in the Operating Agreement, and otherwise complying with and agreeing to the terms and provisions of the Operating Agreement.

#### **EFFECTIVE DATE OF FILING**

Pursuant to Florida Statute 605.0207 the effective date of filing of these article of organization and commencement of the existence of this Limited Liability Company shall be the date these Articles executed.

#### CORRESPONDENCE AND EMAIL ADDRESS

The following is the address and email address for all correspondence to the limited liability company:

3168	Barrett Ave
Naple	s, FL 34112
Email:	Replenishebd@gmail.com

Executed by the undersigned members at Fort Myers, Florida, on this 13 day of 2020.

Stacy Roberts,

its authorized representative

Andrew Gibson,

its authorized representative

(In accordance with Section 605.0203(1)(b), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s. 817.155, F.S.)

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The following is the address and email address for all correspondence to the limited liability company:

\_\_3168 Barrett Ave.\_\_\_ Naples, FL 34112 Email: Replenishcbd@gmail.com

Executed by the undersigned members at Fort Myers, Florida, on this 30 day of 1000.

Stacy Roberts,

its authorized representative

Andrew Gibson,

its authorized representative

(In accordance with Section 605.0203(1)(b), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s. 817.155, F.S.)

•	
STATE OF Flunda	
STATE OF Flunda  COUNTY OF Collins  SS:	
	to and acknowledged before me, an officer duly authorized
the State and County aforesaid, by means of M phys. 2020, by Stacy Roberts, who executed the fo	sical presence, or [ ] online notarization, this 13 day
WITNESS on hand and official seal	in the County and State last aforesaid this 3 day
2020.	
	NOTARY PUBLIC
-1 1	(Typed/printed name) Danvel Benefi Notary Commission No. 4 94/90
My Commission Expires: 12/22/33	rotaly Commission No <u>Gaz - 727 y</u> v
Personally Known or Produced Identification	
Type of Identification Produced Florida Divine Literse	DANIEL BENNETT  Notary Public. State of Florida
	Commission# GG 941950 My comm. expires Dec. 22, 2023
STATE OF SS:	
COUNTY OF The foregoing instrument was sworn the State and County aforesaid, by means of     phy	
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The foregoing instrument was swom the State and County aforesaid, by means of 1 1 phy , 2020, by Andrew Gibson, who executed the	sical presence, or [ ] online notarization, this day foregoing instrument and who did take an oath.
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The foregoing instrument was swom the State and County aforesaid, by means of 1 1 phy	sical presence, or [ ] online notarization, this day foregoing instrument and who did take an oath.  I in the County and State last aforesaid this day  NOTARY PUBLIC (Typed/printed name) Notary Commission No.:

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STATE OF	'   '
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the State and County aforesaid	ng instrument was sworn to and acknowledged before me, an officer duly authorized in d. by means of [ ] physical presence, or [ ] online notarization, this day of berts, who executed the foregoing instrument and who did take an oath.
WITNESS r , 2020.	ny hand and official seal in the County and State last aforesaid this day of
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My Commission Expires:	(Typed/printed name) Notary Commission No.:
Personally Known or Produced I	dentification
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STATE OF LOW AND COUNTY OF LAN MIE	SS:
the State and County aforesaid	ng instrument was sworn to and acknowledged before me, an officer duly authorized in d. by means of [ ] physical presence, or [ ] online notarization, this 30 day of Gibson, who executed the foregoing instrument and who did take an oath.
WITNESS 1	ny hand and official seal in the County and State last aforesaid this 30 day of
	Augela Menee Mobils NOTARY PUBLIC (Typed/printed name)
My Commission Expires:	Notary Commission No. 20204 (2037 5 5
Personally Known or Produced I	·
Type of Identification Produced	ANGELA RENEE ROBERTS
	S 20

2020 APR 17 PM 3: 18
SECRETARY OF STATE
TALLAHASSEE, FL

### CERTIFICATE OF DESIGNATION OF REGISTERED OFFICE AND REGISTERED AGENT

PURSUANT TO THE PROVISIONS OF SECTION 605, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

The name of the limited liability company is **HEMPRA**, LLC.

The name of the initial registered agent of the limited liability company is Kevin F. Jursinski, Esquire and the address of the office of the registered agent is 15701 S. Tamiami Trail, Fort Myers, Florida 33908.

#### REGISTERED AGENT ACCEPTANCE

Having been named as registered agent and to accept services of process for the above stated limited liability company at the place designated in this Certificate, I hereby accept the appointment as registered agent and agree to act in that capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S..

IN WITNESS WHEREOF, I have hereunto set my hand and seal this Hand of day of 2020.

KEVIN F. JURSINSKI, ESQUIRE